2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000098165

Entity Name: NORMANDY SHORES REALTY, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	"H SHORE DRI CH, FL 33141	IVE					
Current Mailing Address:			Nev	New Mailing Address:			
	"H SHORE DRI CH, FL 33141	IVE					
FEI Number:	20-1342996	FEI Number Applied For ()	FEI Number	Not Applic	cable () C	ertificate of Status Desired ()	
Name and Address of Current Registered Agent:			Nar	Name and Address of New Registered Agent:			
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US			935	FULLER, HOPE MS. 935 NORTH SHORE DRIVE MIAMI BEACH, FL 33141 US			
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.							
SIGNATURE: HOPE FULLER				04/30/2007			
	Electronic	Signature of Registered Agent	• •			Date	
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			AD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VT () E STANTON, SCOT 1001 NORTH SH MIAMI BEACH, F	ORE DRIVE			() Cl	nange()Addition	
Title: Name: Address: City-St-Zip:	D () E STANTON, SCOT 1001 NORTH SHI MIAMI BEACH, F	ORE DRIVE			() CI	nange () Addition	
Title: Name: Address: City-St-Zip:	PS () E FULLER, HOPE I 925 NORTH SHO MIAMI BEACH, F	RE DRIVE			() CI	nange () Addition	
Title: Name: Address: City-St-Zip:	D () E FULLER, HOPE I 925 NORTH SHO MIAMI BEACH, F	(RE DRIVE	Title Nam Addr City-	ie:	() CI	nange () Addition	
Title: Name: Address: City-St-Zip:	()[Delete			D () CI HEPP, EDUARDO 520 W 49TH STRI MIAMI BEACH, FL	EET	
Title: Name: Address: City-St-Zip:	() [Delete			V () CI HEPP, EDUARDO 520 W 49TH STRE MIAMI BEACH, FL	EET	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HOPE FULLER P 04/30/2007